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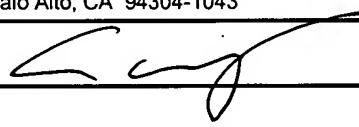
Total Number of Pages in This Submission	6	Attorney Docket Number	51456.00003
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ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Return Postcard <input checked="" type="checkbox"/> Amendment / Response <small>[Total 3 pages]</small> <input type="checkbox"/> Amendment After Final <input type="checkbox"/> Declaration of Inventor(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Request for Continued Examination <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) – Replacement Drawing Fig. 2 (Total 1 page) <input type="checkbox"/> PTO SB/08a <input type="checkbox"/> PTO SB/08b <input type="checkbox"/> Issue Fee Transmittal (PTO-85b) <input type="checkbox"/> New Power of Attorney, Revocation of Previous Powers, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Affidavit	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC <small>(Appeal Notice, Brief, Reply Brief)</small> <input type="checkbox"/> Status Request <input checked="" type="checkbox"/> The Director is authorized to charge any required fees or credit any overpayment to Deposit Acct. No. 05-0150. A duplicate of this sheet is enclosed for this purpose. <small>[Total 2 pages]</small> <input type="checkbox"/> Other Enclosure(s) <small>(please identify below):</small>
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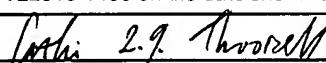
Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Squire, Sanders & Dempsey L.L.P. 600 Hansen Way, Palo Alto, CA 94304-1043		
Signature			
Printed Name	Aaron Wininger		
Date	November 29, 2005	Reg. No.	45,229

CERTIFICATE OF TRANSMISSION/MAILING

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Signature	
Typed or printed name	Cathi L.G. Thoressell
Date	November 29, 2005

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PALOALTO/91469.1



PATENT
Attorney Docket No.: 51456.00003

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Examiner: Frantz B. Jean

Joseph C. Sturtevant, *et al.*

Serial No.: 10/020,259

Art Unit: 2151

Filed: December 13, 2001

Title: SYSTEM AND METHOD FOR AGGREGATING DATA HAVING
DATA AND APPLICATION DEPENDENCIES

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE

Sir:

In response to the Office Action dated October 6, 2005, please amend the above-identified application as follows: